BEST AVAILABLE COPY

Complete and Send	Fthis form, together w		` '	<u>Mail</u>	NSMITTAL Mail Stop ISSUI	E FEE		
40					Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885			
INSTRUCTIONS: This for appropriate All further continuitated under corrected maintenance in the continuity of the contin	orm slowld be used for transcription or directed otherwise	Patent, advance of in Block 1, by (a	JE FEE and I rders and notif a) specifying a	PUBLIC fication new co	ATION FEE (if requote fees or respondence address	uired). Blocks 1 through 5 will be mailed to the currents; and/or (b) indicating a sep	should be completed who t correspondence address arate "FEE ADDRESS"	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, much ave its own certificate of mailing or transmission.			
BAKER & BOT 30 ROCKEFELLE NEW YORK, NY	ER PLAZA				Ce I hereby certify that the States Postal Service addressed to the Ma transmitted to the USI	rtificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (571) 273-2885, on the o	smission g deposited with the Unit st class mail in an envelo above, or being facsim late indicated below.	
2/2006 RMEBRAH1 00000021 09593785					Gary M. Butter (Depositors name			
FC:1501	1400.00 OP	400.00 DP			ATO			
					June 6, 2006		(Da	
APPLICATION NO.	FILING DATE	FIRST NAMED I		INVEN	ror	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/593,785	09/593,785 06/14/2000		Thomas A. Shreiner		r	AP32438.70121	7746	
TITLE OF INVENTION: E	XPANSION JOINT COVER	R WITH MODULA	AR CENTER					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400			\$0	\$1400	07/03/2006	
EXAM	EXAMINER		ART UNIT		ASS-SUBCLASS	ן		
NGUYEN, CHI Q		3635			052-393000	,		
CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
(A) NAME OF ASSIGN E.M.E.	an assignee is identified by 37 CFR 3.11. Completion EE	elow, no assignee of this form is NO	data will appe T a substitute f (B) RESIDEN Leba	ear on the for filing NCE: (C	e patent. If an assign an assignment. ITY and STATE OR G New Jersey	08833		
!lease check the appropriate	e assignee category or catego	ries (will not be pr	inted on the pa	itent):	☐ Individual △ C	orporation or other private gro	oup entity Governm	
a. The following fee(s) are	enclosed:	4b	. Payment of F	` '				
☐ Sissue Fee ☐ A check in the amount of the fee(s) is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.								
						arge the required fec(s), or cre	dit any overpayment, to	
5 Change in Entity Status	(from status indicated above	<u> </u>	Deposit A	ccount	umber 02-4377	(enclose an extr	a copy of this form).	
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	• • •			LL ENTITY status. See 37 C		
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issi sublication Fee (if required) vords of the United States Pate	ne Fee and Publicate vill not be accepted and Trademark	tion Fee (if any d from anyone Office.	y) or to r other th	e-apply any previousl an the applicant; a reg	y paid issue fee to the application istered attorney or agent; or the	ation identified above. ne assignee or other party	
Authorized Signature					Date	June 6, 2006	·	
Typed or printed name Gary M. Butter					Registration No. 33,841			
This collection of information application. Confidential Abmitting the completed aphis form and/or suggestions hox 1450, Alexandria, Virginia 22313-Under the Paperwork Reduction	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. oplication form to the USPT s for reducing this burden, slinia 22313-1450. DO NOT 1450.	11. The information 122 and 37 CFR O. Time will vary sould be sent to the SEND FEES OR Coare required to res	on is required to 1.14. This colle depending upon the Chief Information of the Completed of the collection of the collection of the collection is required to a collection of the collection of	o obtain ection is on the in ation Of FORMS	or retain a benefit by a sestimated to take 12 advividual case. Any conficer, U.S. Patent and S TO THIS ADDRESS it information unless it	the public which is to file (and minutes to complete, includir omments on the amount of tin Trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB control	d by the USPTO to proce ag gathering, preparing, a me you require to compl artment of Commerce, P for Patents, P.O. Box 143 number.	
<u>P</u>								